should be from one to four grains; if any benefit is to be obtained it will be from the latter dose. The disagreeable symptoms—nausea, vomiting, syncope, and headache—which may arise during the administration of the drug are relieved if a primary sedative and stimulant are given: fifteen minims of aromatic spirits of ammonia, one or two minims of tincture of capsicum, five minims of a solution of morphine hydrochlorate, and chloroform water to one-half fluidounce. In angina pectoris, small doses which keep the bloodvessels in a slight state of relaxation give the best results. Large doses may so much reduce the blood-pressure that the heart, already weak, is unable to accommodate itself tô the suddenly altered conditions, and syncope may take place. In irregular heart action relief follows in many cases. The explanation may be that some poison circulating in the blood causes a contraction of the bloodvessels of the periphery. Theoretically, paroxysmal bronchitic asthma should be benefited, yet so far as the evidence in six cases goes, this is not the case. In neurotic asthma the remedy failed, and in subacute bronchitis it is difficult to say if the drug had any effect. Graves' disease appears to be aggravated by it.—*Practitioner*, 1894, No. 311, p. 345.

Local Applications of Guaiacol.

M. Ferrand reports at the *Société Médicale des Hôpitaux* that in order to use this remedy as a local analgesic over large areas, without irritating the skin, it should have added to it an equal part of glycerin and be covered with tissue to prevent evaporation. The analgesia commences at once, and is established in a few hours; should pain return, it can be relieved by renewed applications. On the other hand, in order to obtain anti-thermic effects, it is necessary to use the drug pure or almost pure; in each case in a vehicle which can be absorbed by the skin.—*Revue de Thérapeutique Medico-Chirurgicale*, 1894, No. 10, p. 267.

The Hypodermatic Use of Mercurials in Syphilis.

Dr. L. Wolff, from an extensive correspondence, finds that: 1. This method of using mercurials is largely employed in the treatment of syphilis, with probably the exception of France. 2. The order of preference is for sublimate, next calomel, then the salicylate, yellow oxide, and gray oil. 3. The soluble are preferred to the insoluble preparations. 4. Calomel holds the first place as to rapidity of action and permanence of effect. 5. The duration of treatment should be determined by the complete disappearance of symptoms. 6. Serious complications may be avoided by proper care and cleanliness. 7. The hypodermatic method is established upon a firm basis. 8. With the exception mentioned above, the hypodermatic injection has to a great extent superseded the oral administration of mercurials.

Dr. Orville Horwitz has made a clinical study of the hypodermatic method of administering corrosive sublimate and gray oil. He concludes that: 1. Hypodermatic medication will not abort the disease. 2. It should not be employed as a routine method. 3. The production of abscesses and ptyalism must be rare. 4. Injections of corrosive sublimate give rise to trifling pain, but not to callosities. 5. The gray oil gives rise to slight pain and always produces induration. 6. The gray oil is more dangerous than corrosive sublimate. 7. In suitable cases, when properly employed, these remedies are among the strongest weapons wherewith to fight the disease. 8. One-quarter of a grain of corrosive sublimate should be administered in each injection; if mercurials have already been employed, one-sixth of a grain. 9. Corrosive sublimate is of undoubted value in lesions of the face, and when a rapid impression is desired; likewise when important structures, as the brain or eye, are attacked. The hypodermatic treatment is a substitute for inunction, of advantage when time is an object; in relapsing syphilis; in disease of the nervous system; in rebellious eruptions. 10. The gray oil should be employed in severe secondary syphilis when there is evidence of a tendency to relapse; in nervous syphilis it is far superior to inunctions. 11. This treatment is the most reliable and active that can be employed.—*The Therapeutic Gazette*, 1894, No. 5, p. 309.

ANÆSTHESIA BY ETHYL BROMIDE.

DR. CH. ELOY carefully reviews this subject. Anæsthesia takes place in two stages: the first partial—consciousness is not lost; the second, consciousness is lost. It is an anæsthetic at once powerful and rapid. It cannot be employed for long operations nor when there is likely to be a great loss of blood, for the drug will increase it. Clinically it is contra-indicated in pulmonary tuberculosis, acute or chronic bronchitis, pulmonary emphysema, cardiac affections, severe anæmia, hysteria, and alcoholism. It is employed in the same way as is chloroform. It is the anæsthetic of choice for short operations, but it cannot replace chloroform. If used with chloroform (mixed anæsthesia), it shortens the pre-anæsthetic stage, and is the method of choice in large operations.—*Journal des Praticiens*, 1894, No. 35, p. 412.

[When this anæsthetic was employed in this country, some fourteen years ago, it was found to be dangerous, even causing death, so that its use was abandoned.—R. W. W.]

THE PHYSIOLOGICAL ACTIONS OF ALCOHOL.

DR. DAVID CERNA concludes a most interesting paper as follows: 1. Alcohol in small amounts excites and in large doses depresses both the peripheral motor and sensory nerves. 2. Excessive quantities cause a spiral degeneration of the axis cylinder of nerve fibres. 3. Reflex action is at first increased and afterward diminished by an influence exerted upon the spinal cord and the nerves. 4. In small amounts the drug stimulates the cerebral functions; it afterward, especially in large quantities, depresses and finally abolishes them. 5. Alcohol causes a lack of co-ordination by depressing both the brain and spinal cord. 6. In toxic doses alcohol produces hyperæmia of both brain and spinal cord, especially of the lumbar enlargement of the latter. 7. Small doses of alcohol produce increased rapidity of the heart-beat; large amounts, a depression of the same. In either case the effect is brought about mainly through a direct cardiac action. 8. The drug in small quantities causes a rise of the arterial pressure by a direct action upon the heart; in large amounts it depresses the arterial pressure similarly through a cardiac influence. 9. In large doses alcohol enhances coagulation of the blood; in toxic quantities it destroys the ozonizing power of this fluid, causing a sepa-